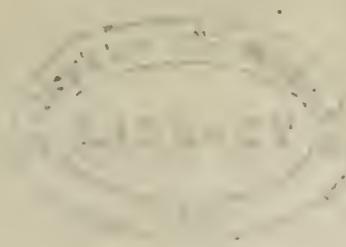


LIBRARY



BOROUGH OF LOWESTOFT

ANNUAL REPORT

by the

MEDICAL OFFICER OF HEALTH

for the year

1947

Public Health Officers (at 31st December, 1947)

---

Medical Officer of Health:

V. R. WALKER, M.B., Ch.B., B.Sc., D.P.H.

Assistant Medical Officer:

MARGARET S. WHITE, M.B., Ch.B., D.R.C.O.G.

Dental Officer:

JANET W. HEPBURN, L.D.S.

Chief Sanitary Inspector:

A. ISHERWOOD, C.R.S.I.

Additional Sanitary Inspectors:

R. F. KNOWLES, C.R.S.I.  
F. W. Y. BUCKLEY, C.R.S.I.

Matron, Isolation Hospital:

MISS D. P. FENN

Health Visitors:

MISS W. LARGE  
MISS M. SHIPPERBOTTOM  
MISS R. V. STILES  
MISS K. M. WRIGHTON

Chief Clerk:

MISS N. TURRELL

Health Department,  
123 High Street.

Your Worship the Mayor, Ladies and Gentlemen,

I beg to submit my annual report on the health of the borough during the year 1947 as directed by Circular 170/47.

The local birth rate of 25.1 exceeded the national figure of 20.5 by nearly one fourth, explicable by the amount of demobilisation from war service and the high marriage rates in the preceding years. The total of 1020 live births, the highest number since 1921, was almost certainly abnormal and unlikely to be approached in future years. During 1947 it placed a heavy strain on domiciliary and hospital midwifery; with the high figures for preceding years it will in the near future put a heavy cumulative strain on the local public elementary schools.

The local infant mortality figure of 38 per thousand fell below the low record of 41 for England and Wales. With a return towards relatively normal borough population in the last 3 years it is of interest to compare the annual rates with those for the 3 years 1937-1939 immediately prior to hostilities. A reduction of exactly one third found between the two periods in the average mortality rate indicates a more favourable child environment. Cursory inspection of school entrants shows an even greater decrease in the number of stunted or undernourished children, again showing the excellent return for the special priorities afforded nationally in the nurture of the young.

No cause of mortality or sickness has been specially noteworthy. Only two cases of poliomyelitis were confirmed locally in the widespread outbreak of the summer months.

Efforts to secure immunisation against diphtheria of pre-school children continued to meet with local success and, almost certainly from the high local proportion of children immunised, diphtheria during the year reached the low total of three cases without fatality. Apart from the child lives spared and the amount of suffering and parental anxiety avoided, the annual cost to the community of nursing cases of prolonged diphtheritic illness in hospital has in the last few years been much reduced by the fall in their average number to about one eighth of the average figure before 1940.

The welfare staff was increased during the year but still falls below the local pre-war establishment. From 5th July, 1948 much of the work of the department will pass to East Suffolk County Council as Local Health Authority under the Health Service Act, 1946 but the borough council will retain the duties of a local sanitary and port health authority. I would record the continued willing service of all departmental staff during the year.

I am, Ladies & Gentlemen,  
Your obedient Servant,  
V. R. WALKER.

June, 1948

Medical Officer of Health.

A. Statistics and Social Conditions of the Area		
Area (including foreshore)	... ... ... ...	(Acres) 5,495
Population at 1931 Census	... ... ... ...	41,768
Registrar-General's estimate of resident population, mid-1947	... ... ...	40,640
Number of inhabited houses according to rate books at December, 1947 (estimated)	...	11,887
Rateable value - 1st April, 1947	... ... ...	£244,653
Sum represented by a penny rate (1946/1947)		£925

EXTRACTS FROM VITAL STATISTICS OF THE YEAR

LIVE BIRTHS	Legitimate	<u>Totals</u>	Male	Female
	Illegitimate	967	500	467
		53	24	29
		<u>1020</u>	<u>524</u>	<u>496</u>

LOWESTOFT

Comparative  
figures for  
England & Wales

BIRTH RATE per 1,000 estimated resident population mid-1947 ... ... 25.1 20.5

	<u>Total</u>	Male	Female
--	--------------	------	--------

STILLBIRTHS -	23	9	14
Rate per 1,000 total (live & still) births	...	22	24

	<u>Total</u>	Male	Female
--	--------------	------	--------

DEATHS -	516	273	243
Death rate per 1,000 estimated average population		12.7	12.0

DEATH RATE OF INFANTS UNDER ONE YEAR OF AGE  
All infants per 1,000 livebirths ... 38 41

Legitimate infants per 1,000 legitimate births	...	...	35	-
Illegitimate infants per 1,000 illegitimate births	...	...	94	-

DEATHS FROM PUERPERAL CAUSES - Rates per 1,000 (live & still) births

Puerperal Sepsis	...	...	0.0	0.26
Other Puerperal Causes	...	...	2.88	0.91

Deaths from Cancer (all ages)	69
" " Measles (all ages)	1
" " Whooping-cough (all ages)	0
" " Diarrhoea (under 2 years of age)	4

Comment on Vital Statistics

The local death rate continued slightly higher than for England and Wales due to the moderate degree of loading in the higher age groups of the borough population.

The further marked rise to 1020 live births, from the 1946 figure of 907, gave the highest local number since 1921 but did not reach the all time record of 1252 in 1920 following demobilisation after the first world war. The 1947 figure was almost certainly abnormal and is unlikely to be approached in future years, since the high number of children from the early 1920s have now reached maturity and there will be a continued shift of the larger age groups towards the middle age-periods.

The stillbirth and infant mortality rates for the year fell below the national figures but (exceptionally) the maternal death rate from puerperal causes other than sepsis compared unfavourably.

The proportion of births registered as illegitimate has fallen markedly to 5.2%, from 9.0% in 1946.

For zymotic diseases one death occurred locally from measles but diphtheria, whooping-cough and scarlet fever were without mortality.

## B. General Provision of Health Services for the Area

The previously vacant post of assistant medical officer was filled from 1st January, 1947 by Dr. Margaret White. During the year the welfare authority was also able to secure the services of a fourth combined health visitor and school nurse.

Midwifery Service The municipal midwifery scheme continued to be carried out by the midwives of the Lowestoft & District Nursing Association, under subsidy from the Borough Council as local supervising authority. During the year almost all domiciliary confinements within the area were conducted by the midwives of that voluntary body, acting as maternity nurses on 343 occasions and as midwives in 383 cases. The further increase in the total number of local births made heavy demands upon the services of the domiciliary midwives and, as the acute nation-wide shortage of midwives made it difficult to obtain sufficient staff, a high number of cases was dealt with by each midwife, involving prolonged and heavy duty. The number of summonses for medical assistance to midwives was 245 (217 domiciliary and 28 institutional).

By the provision of one further course of instruction during the year all local domiciliary midwives became qualified to administer gas-air analgesia. Heavy pressure on midwives and the difficulty in transporting apparatus has prevented this measure being as freely available as the supervising authority would wish. Nevertheless 124 cases (45 as midwife and 79 as maternity nurse) took advantage during the year compared with 46 cases in the previous year. The measure is found most valuable in first confinements but it is surprising that its offer to patients is quite frequently declined.

Maternity Services 137 maternity cases were admitted to the Lowestoft & North Suffolk hospital, 2 to the Norfolk & Norwich and 2 to other hospitals from the area of the local welfare authority. Cases were mainly those where difficult or complicated labour was expected but a proportion were mothers whose home conditions were grossly unsuitable for domiciliary confinement. Since through staffing difficulties the maternity annexe projected by the Lowestoft & North Suffolk hospital has not been able to open there has continued locally a large unsatisfied demand for institutional confinement.

Three maternal deaths occurred in the borough during the year, one (from obstetric shock) in domiciliary practice and two (one from eclampsia and one from placenta praevia) in hospital.

Home Helps Provision of home helps was afforded in 44 cases, the Welfare authority accepting primary financial responsibility and recovering part costs under the scale recommended in Circular 110/46. One home help was employed full time and a list was kept of women open to occasional full-time engagement.

Ante Natal, Post Natal and Infant Welfare Centres High attendances continued during the year at the two weekly antenatal centres where routine examination and guidance continues to be carried out by the same district midwives who attend the domiciliary confinements in the borough, an arrangement of mutual convenience to expectant mothers and to midwives. Routine blood typing is performed by the Regional Blood Transfusion Service; certificates of suitability for gas-air analgesia are issued by the medical officer, who can refer possible complications to private practitioner or for specialist advice to obstetric consultants.

During the year a separate weekly post natal session was instituted. At such session the provision of birth control instruction was reinstated, within the terms of Circular 1408, where medical indications rendered such advisable. Patients can be referred for such advice from their private medical attendant.

Four infant welfare sessions were held weekly at the three borough centres, distribution of Ministry of Food priority foods being continued at all sessions. Sterilised accouchement outfits are also on sale at antenatal sessions.

Care of Premature Infants (Circular 20/44) Prematurity continues to be notified on the standard birth notification and assistance towards its special care is afforded through the District Nursing Association. Shortage of hospital accommodation prevents the implementation of recommendations contained in sub-paragraphs (c) (d) and (e).

Care of Illegitimate Children The welfare authority continued to support in the employment of a full-time social worker and to financially assist the maintenance of selected cases in pre-natal homes.

Health Visiting During the greater part of the year the services of four combined health visitors and school nurses were available for visiting the record number of births and the increased school and pre-school child population. More home visiting was achieved despite increased demands on their time for other duties.

In the course of house visitation health visitors continue (under Circular 2831) to advise householders towards improving the general standard of cleanliness and habits and to combat infestation by head lice. The cleansing facilities of the school treatment centres continue available for the help of those members of a household who are over or under the age of school attendance.

The health visiting staff in the course of their work cooperates with the local V.D. treatment centre in the follow-up of defaulters and the tracing of contacts.

#### C.

#### Sanitary Circumstances of the Area

The staff of the Sanitary Inspectors' Department was reduced in May, 1947 when Mr. R. C. R. Robinson, a clerk in the department was granted leave of absence to undergo a course of training in the duties of a sanitary inspector under the further educational training scheme. In July, 1947 Mr. R. P. Long resigned from the post of additional sanitary inspector. At this time a second member of the staff (Mr. L. V. Bailey) was undergoing instruction under the further educational training scheme and it was decided to afford him an opportunity to qualify but unfortunately he was unsuccessful. The post remained vacant to the end of the year but has been filled at the time of writing.

By reason of the absence of junior staff on further training little clerical assistance was available during the year under review and much of this work fell of necessity on the inspectorate.

Water The quality and quantity of the public supply from the local water undertakers continued satisfactory throughout the year. The same procedure regarding chemical and bacteriological sampling of the raw water and also of the filtered and chlorinated supply has been adopted as during the previous year. A total of 96 samples taken from the raw water, during the various stages of filtration and chlorination and from the final piped supply gave uniformly satisfactory reports. The Water Company is still unable to give the exact number of houses supplied by stand-pipes. The water is not liable to plumbo-solvent action and on no occasion during the year was any action required in respect of any form of contamination.

FACTORIES ACT, 1937

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1947  
FOR THE BOROUGH OF LOWESTOFT IN THE COUNTY OF SUFFOLK.  
PART 1 OF THE ACT.

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises	Number on Register	Inspections	Number of	
			Written notices	Occupiers Prosecuted
(i) Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities.	86	39	4	NIL
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	174	125	31	NIL
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises).	5	7	-	-
<b>TOTAL</b>	<b>265</b>	<b>171</b>	<b>35</b>	<b>-</b>

2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspect:	By H.M. Inspect:	
Want of cleanliness S.1.	2	3	-	1	-
Overcrowding S.2.	-	-	-	-	-
Unreasonable temperature S.3.	1	2	-	1	-
Inadequate ventilation S.4.	-	1	-	1	-
Ineffective drainage of floors S.6.	2	2	-	-	-
Sanitary Conveniences S.7.					
(a) insufficient	-	-	-	-	-
(b) unsuitable or defective	13	25	-	21	-
(c) not separate for sexes	-	1	-	2	-
Other offences against the Act (not including offences relating to Out-work)	-	2	-	2	-
<b>TOTAL</b>	<b>18</b>	<b>34</b>	<b>-</b>	<b>28</b>	<b>-</b>

PART V111 OF THE ACT

OUTWORK  
(Sections 110 and 111)

	Section 110	Section 111
No. of outworkers in August list reqd by S.110 (1) (c)	No. of cases of default in S.110 sending lists to the Council	No. of Prosecutions for failure to supply lists unwhole-some premises
Leather Making	2	-
etc.	-	-
... ...	.	.
... ...	.	.
Lets	A complete record of outworkers in this trade is not available.	.
... ...	.	.
... ...	.	.
TOTAL	2	-

D. Housing

The main efforts of the department during the year continued towards removing those housing defects of an urgent nature. In spite of the restrictions on materials a considerable amount of repair work has been effected in rendering many houses reasonably fit for habitation.

The continued return of civilian and service personnel to the town accounted for an increased number of complaints concerning overcrowding. Every effort has been made in cooperation with the Housing Manager to alleviate these conditions.

The Housing Manager reports that up to the end of the year 250 pre-fabricated bungalows and 32 brick-built houses have been occupied on the No. 1 Housing site.

E. Inspection and Supervision of Food

(a) Milk Supply The installation of a new High Temperature Short Time pasteurising plant at a large dairy was commenced in February, 1947, and was completed at about the end of April. Samples which were regularly taken from this plant at various stages of production throughout the remainder of the year satisfied the Phosphatase and Methylene Blue tests, with the exception of one series of three samples taken in June when on each occasion a Phosphatase test showed Group III. The matter was thoroughly investigated with the dairy manager but inquiries failed to reveal that any raw milk had gained access.

Routine inspection under Milk and Dairies Orders was continued throughout the year.

(b) Meat

Slaughterhouses 823 visits were paid during the year to the Ministry of Food slaughterhouse in the Borough and 3610 carcasses were inspected. The total amount of fresh meat and offal condemned as unsound and unfit for food amounted to 29,815 lbs., of which 25,151 lbs. or 77.6% was tubercular. Details concerning the Ministry of Food Slaughterhouse at Bonacre are being included in the Annual Report of the Medical Officer of Health for the Lothingland Rural District Council.

Carcasses Inspected and Condemned

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	697	283	846	1681	103
Number Inspected	697	283	846	1681	103
<u>All diseases except Tuberculosis:-</u>					
Whole carcasses condemned	1	1	5	3	-
Carcasses of which some part or organ was condemned	151	115	17	61	5
Percentage of the number inspected affected with disease other than tuberculosis	21.8%	40.9%	2.6%	3.8%	4.9%
<u>Tuberculosis only:-</u>					
Whole carcasses condemned	8	18	-	-	-
Carcasses of which some part or organ was condemned	71	119	3	-	11
Percentage of the number inspected affected with tuberculosis	11.3%	48.4%	0.35%	-	10.7%

Other Foods Other articles found unfit for human consumption and accordingly condemned were as follows:-

Tomato puree 8912 lbs, corned beef 1951 lbs, corned mutton 113 lbs, Christmas puddings 14,404 lbs, preserves 110 lbs, frozen beef 1402 lbs, frozen lamb 5210 lbs, flour 1624 lbs, cheese 24 lbs, onions 135 cwts, confectionery 106 lbs, dried fruit 60 lbs, dehydrated mutton 108 lbs, dehydrated beef 846 lbs, margarine 40 lbs, bacon 72 lbs, fresh fruit 1027 lbs, sugar 142 lbs, nuts 23 lbs, milk 2274 tins, mixed food 1344 tins, meat 51 tins, fish 255 tins, cereals 261 packets, smoked fish 13 stones, herrings 202 stones, fish 509 stones.

The Salvo Officer was notified as occasion required.

Adulteration Two formal samples, one of Glauber Salts and one of Bronchial Lozenges, were reported as non-genuine by the Public Analyst during the year.

With regard to the former the Public Analyst reported the sample to be one of Epsom Salts. The manufacturers were communicated with and they admitted that the mistake arose in their packing department. They undertook to withdraw all supplies as far as possible and to replace existing stocks of retailers.

With regard to the latter, the Public Analyst stated that the sample was not one of genuine Bronchial Fumigation but their therapeutic value was negligible, and that they were objectionable as they contained 80% chalk. Inquiry revealed that the particular sample was very old and that in the interim period the distributors (who were not manufacturers) had changed their suppliers and were satisfied that the new pack would meet with approval. They undertook to withdraw supplies of the old pack from all receivers they could contact.

F. Prevalence of, and Control over, Infectious and Other Diseases.

The following table shows the incidence of notifiable diseases during the year 1947:-

Disease	Total cases notified (after correction)	Cases admitted to Isolation Hospital	Total Deaths (within borough)
Smallpox	-	-	-
Scarlet Fever	9	1	-
Diphtheria	3	3	-
Poliomyelitis	2	2	-
Cerebro-spinal fever	3	2	1
Typhoid	-	-	-
Paratyphoid	-	-	-
Dysentery	3	-	-
Puerperal Pyrexia	8	2	-
Ophthalmia Neonatorum	5	3	-
Bryosipelas	3	1	-
Pneumonia	16	2	27
Whooping-cough	49	-	-
Measles	406	8	1

Apart from epidemic prevalence of measles, the incidence of infectious diseases is seen to have been very low.

Scarlet Fever The total of 9 notified cases (quarterly incidence 2, 2, 0 and 5) was the lowest for many years. In recent years this syndrome has become so mild that often the rash is unaccompanied by fever and frequently may be itself poorly developed. Associated with the small group of cases at the end of the year there was noted a prevalence of middle ear disease, almost certainly due to a rise in streptococcal throat infections among the child population.

The scarlatinal syndrome is so illdefined at present that the advisability of its continued notification as a specific infectious disease can be doubted. Certainly the policy of discouraging hospital isolation unless for special home or occupational factors is found to be well justified. Only one case was for special reasons hospitalised during the year.

Diphtheria After the small wave of 19 cases in 1946 the total confirmed cases for 1947 numbered 3, a record low figure. Two cases of moderate severity were a young mother and her two year old infant, the infant being of laryngeal type; neither case had been immunised. The third case was a mixed nasal infection in an immunised child, detected by a health visitor taking a nasal swab, and quickly clearing up with short isolation and a minimal dose of serum. In this latter case the mother and another immunised child of the family were found to be temporary carriers, for which the mother as a school teacher was excluded from duty until free from infection. The infecting organism in all cases and identified carriers was found by the M.R.C. laboratory to be of 'mitis' type.

No deaths from diphtheria occurred during the year.

Poliomyelitis Only two cases were confirmed during the year; aged 12 and 3 years, their dates of onset were very close (25.7.47 and 31.7.47) but no direct connection could be traced. Several cases of febrile illness around the same period were suspect but in the absence of any complicating paralysis were not confirmed as poliomyelitis. It is of interest that the incidence of the disease was much lower in the borough than in the surrounding rural area, where adult cases were more frequent. Some degree of immunity of the urban population may have been due to a small local outbreak in the last quarter of 1937.

Cases of this illness were admitted direct to Ipswich I.D. Hospital for special supervision, and later transferred to White Lodge Hospital, Newmarket, for the orthopaedic treatment of paralytic sequelae. Cases and their immediate contacts were fully investigated for the M.R.C. field survey for the region.

Puerperal Pyrexia 8 cases were notified during the year, the quarterly distribution being 4, 1, 2 and 1. The clinical picture was generally mild but two mothers with their infants were admitted to the Isolation Hospital for treatment. There was no evidence of any common source of infection in the group and no death occurred from sepsis.

Ophthalmia Neonatorum Five cases were notified, three infants being admitted to the Isolation Hospital for intensive local penicillin treatment, all accompanied by the mothers for breast feeding. All cases made rapid recovery without damage to vision.

Food Poisoning A small outbreak occurred locally about the 16th May affecting several families. At least 11 persons were sufficiently ill to require medical treatment and the illness though sharp was of short duration and without fatality. Bacteriological proof was obtained that the cause was a staphylococcal toxin generated in the glaze of a meat preparation manufactured outside the town. All unsold portions of the food were traced and surrendered to the sanitary department.

Infantile Gastro-enteritis An undue local prevalence of this disease during the first quarter of the year was investigated by an epidemiologist of the Medical Research Council.

Cerebro-spinal fever Three sporadic cases occurred during the year with one fatality.

Measles showed a marked epidemic prevalence in the second quarter of the year and whooping-cough a mild prevalence in the fourth quarter. For unfavourable home circumstances or special factors 8 cases of measles and one whooping-cough were admitted to the Isolation Hospital. Only one death from measles was recorded locally during the year.

#### Diphtheria Prophylaxis

Efforts to secure immunisation of the child population were continued during the year, an additional 667 children under 5 years and 145 over 5 but under 15 years completing such measure. Special efforts, particularly home canvassing by health visitors, continued for securing the protection of infant children from the age of 8 months onwards and local facilities continue to afford immunisation to both infants and school children at all welfare sessions without prior appointment. Such convenient arrangements to parents, together with the follow-up recommended in Part 7 of Circular 194/45, has resulted in a fairly high degree of acceptance by parents of pre-school children.

Since the degree of immunity conferred by artificial immunisation in early infancy may diminish in the 3 or 4 years' interval before a child commences school attendance, the offer to parents of a single 'reinforcing' dose for school entrants at their first medical

inspection continues to be made. During 1947 a further 546 children previously immunised received such single "refresher" dose upon signed parental consent.

Borough Isolation Hospital

The following table gives the number and nature of the admissions during the financial year ended 31st March, 1948 both for the borough and from other authorities:-

<u>Disease</u>	<u>Admitted from area of Borough</u>	<u>Admitted from other authorities.</u>
Scarlet Fever	1	2
Paratyphoid	-	1
Puerperal Pyrexia	2	2
Suckling infants	2	2
Ophthalmia Neonatorum	4	-
Nursing Mothers	2	-
Measles	9	-
Erysipelas	-	1
Whooping-cough	1	1
Poliomyelitis	-	2
Observation cases	6	6
 TOTALS	 27	 17

The number of cases admitted was again low and the continued absence of serious infectious disease has been particularly fortunate in view of the great difficulty in obtaining nursing staff. The operation of the hospital throughout the year was confined to the ward block of 12 separate cubicles which allows nursing of varied infectious diseases. Observation cases (where an infectious nature awaited confirmation) can also be admitted and the cubicle block, constructed in 1938, has proved a most useful asset. Risk of cross-infection is greatly reduced and the period of inpatient stay can with safety be considerably shortened.

Owing to shortage of nurses the hospital was closed in the summer for a period about five weeks when cases from all contributing authorities were by arrangement admitted to Yarmouth I.D. Hospital. Also 18 cases of suspected poliomyelitis (some not confirmed) were admitted to the special wards arranged for their nursing at Ipswich and Norwich Isolation Hospitals. Altogether 25 cases (8 from Lowestoft and 17 from the contributing areas) were admitted to other infectious hospitals on the financial responsibility of the Lowestoft Health Committee.

As regards treatment, sulphonamides and later penicillin have in the last few years greatly reduced the gravity and length of illness in cases of puerperal sepsis, cerebro-spinal meningitis, ophthalmia neonatorum and erysipelas. As an example, two newborn infants with ophthalmia admitted with their mothers by ambulance early in the day for continuous treatment of the eyes were discharged home the same evening.

## TUBERCULOSIS

New cases and mortality during 1947 are given for the area in the following table:-

	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0 - .. .	-	-	-	-	-	-	-	-
1- .. .	-	-	2	-	-	-	1	-
5- .. .	-	1	1	1	-	-	-	-
15- .. .	4	6	-	1	-	4	-	-
25- .. .	6	7	-	1	2	3	-	-
35- .. .	3	5	1	-	4	-	-	-
45- .. .	3	3	-	-	-	1	-	-
55- .. .	2	-	-	-	1	-	-	-
65 and upwards	-	1	-	-	-	-	-	-
 Totals	 18	 23	 4	 3	 7	 8	 1	 -

Figures tabulated  
by Registrar  
General after  
final transfers

• • • • 6 9 3 -

There was a considerable reduction from the previous year in the figures for both new cases and deaths, most marked in notified cases of male respiratory disease.

With regard to efficiency of notification of tuberculosis, a single death was registered (from pulmonary disease) in a case not previously notified.

